

**IN THE UNITED STATES DISTRICT COURT
FOR THE SOUTHERN DISTRICT OF MISSISSIPPI
SOUTHERN DIVISION**

RODERICK CLARK MILLER

PLAINTIFF

VERSUS

CIVIL ACTION NO. 1:07cv541LG-JMR

**HARRISON COUNTY, MISSISSIPPI, by and through
its Board of Supervisors, HARRISON COUNTY
SHERIFF DEPARTMENT, SHERIFF GEORGE
PAYNE, officially and in his individual capacity,
DIRECTOR OF CORRECTIONS MAJOR DIANNE
GATSON-RILEY, officially and in her individual
capacity, BOOKING SUPERVISOR CAPTAIN RICK
GASTON, officially and in his individual capacity,
TRAINING DIRECTOR CAPTAIN PHIL TAYLOR,
officially and in his individual capacity, CENTRAL
CONTROL OFFICER PRESTON WILLS, officially
and in his individual capacity, BOOKING ROOM DEPUTY
JERRED MARK NECAISE, officially and in his individual
capacity, BOOKING ROOM DEPUTY CATHERINE
PAVOLINI, officially and in her individual capacity,
AMERICAN CORRECTIONAL ASSOCIATION, and
OTHER UNKNOWN JOHN and JANE DOES A-Z, also in
their official and individual capacities**

DEFENDANTS

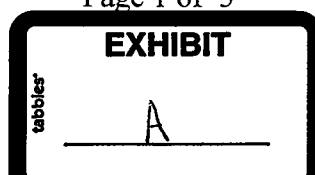
STATE OF MISSISSIPPI

COUNTY OF HARRISON

**AFFIDAVIT OF WARDEN DONALD CABANA
HARRISON COUNTY SHERIFF'S OFFICE**

PERSONALLY CAME AND APPEARED BEFORE ME the undersigned authority
in and for the County and State aforesaid, the within named, DONALD CABANA, who,
after first being duly sworn by me on his oath, did depose and state the following:

Page 1 of 3



1. My name is DONALD CABANA, and I am over the age of twenty-one (21) years. I am a Major with the Harrison County Sheriff's Office and I am the Director of Corrections for the Harrison County Adult Detention Center and have held this position since August 18, 2006. I have personal knowledge of the matters and facts contained in this Affidavit and I am competent to testify to the matters stated herein.
2. As Director of Corrections for the Harrison County Sheriff's Office, I have first hand knowledge of the maintenance and/or storage of records of the Harrison County Sheriff's Office for the Adult Detention Center and what those records reflect, including inmate medical records, inmate court records, and policies of the Harrison County Sheriff's Office.
3. I have attached hereto as **Exhibit "1"** relevant portions of Roderick Clark Miller's inmate records. They are a true and correct copy of Plaintiff's inmate records contained in the files of the Harrison County Adult Detention Center, which are maintained in the regular course of the law enforcement function of the Sheriff of Harrison County and the Harrison County Adult Detention Center, and were generated in the regular course and pursuant to the regular activities of and duties imposed by law upon the office of the Harrison County Sheriff and made at or near the time of the matters set forth or from information transmitted by, a person with knowledge of those matters.
4. I have attached hereto as **Exhibit "2"** relevant portions of Miller's medical records contained in the files of the Harrison County Adult Detention Center, which are maintained in the regular course of the law enforcement function of the Sheriff of Harrison County and the Harrison County Adult Detention

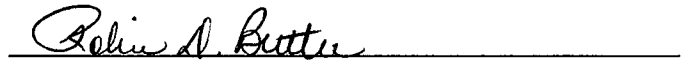
Center, and were generated in the regular course and pursuant to the regular activities of and duties imposed by law upon the office of the Harrison County Sheriff and made at or near the time of the matters set forth or from information transmitted by, a person with knowledge of those matters.

I certify the above declaration is true and correct under penalty of perjury.



Affiant/Donald Cabana
Harrison County, Mississippi

Sworn to and subscribed before me on this the 7th day of July, 2008.


Notary Public

My Commission Expires:

(SEAL)

MISSISSIPPI STATEWIDE NOTARY PUBLIC
MY COMMISSION EXPIRES NOV. 28, 2008
BONDED THRU STEGALL NOTARY SERVICE

HARRISON COUNTY
SHERIFF'S OFFICE☐ JUVENILE INVOLVED

OFFENSE FORM I

INCIDENT NUMBER 04-27837

| | | | | | | | | | | | |
|--------------------------------|--|-------------------------|--|-----------------------------|---|---------------------------------|--|---------------------------------|---|---------------------------------|--|
| OFFENSE | 1. Type Offense Domestic Violence (Simple Assault) | | 2. Code | | 3. Type Offense | | 4. Code | | 5. Offense Occurred | | |
| | 6. Date Offense Reported 04-17-04 | | 7. Time Offense Reported 1618 | | 8. Location of Offense (Street Address) 18049 Old Hwy 49 Apt. A Sausalito, MS 39574 | | 9. Firm Name (If Commercial) N/A | | 10. Grid 11C | | |
| | 11. Patrol Area CJ | | 12. Shift Evening | | 13. Day(s) of Week Occurred S M T W T F (S) | | 14. Victim's Name (Last, First, Middle) Hahn Veronica L. | | 15. Residence Address 18049 Old Hwy 49 Apt. A Sausalito, MS 39574 | | |
| VICTIM / WITNESS | 16. Res. Phone 832-5171 | | 17. Victim DOB 10-12-78 | | 18. Sex F | | 19. Race W | | 20. Employer/School Memorial Hospital | | |
| | 21. Business/School Address 1500 13th Street Gulfport, MS | | 22. Bus. Phone 863-5307 | | 23. * <input type="checkbox"/> V <input type="checkbox"/> RP <input type="checkbox"/> W <input type="checkbox"/> P | | 24. Name (Last, First, Middle) Judy Coley | | 25. Residence Address on file | | |
| | 26. Res. Phone on file | | 27. DOB on file | | 28. Sex M | | 29. Race W | | 30. Employer/School Harrison County S.O. | | |
| PROPERTY | 31. Business/School Address P.O. Box 1480 | | 32. Bus. Phone | | 33. * <input type="checkbox"/> V <input type="checkbox"/> RP <input type="checkbox"/> W <input type="checkbox"/> P | | 34. Name (Last, First, Middle) | | 35. Residence Address | | |
| | 36. Res. Phone | | 37. DOB | | 38. Sex | | 39. Race | | 40. Employer/School | | |
| | 41. Business/School Address | | 42. Bus. Phone | | 43. Victim/Suspect Relationship 1 2 3 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Stranger <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Acquaintance <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Relative N/A | | 44. <input type="checkbox"/> Alcohol Related <input type="checkbox"/> Drug Related | | 45. Status** <input checked="" type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> R <input type="checkbox"/> O <input type="checkbox"/> D | | |
| VEHICLE | 46. Qty. 01 | | 47. Article Camera | | 48. Brand, Make or Manufacturer Kodak | | 49. Model Name and Number Fujiflex | | 50. Description (Color/Size) 35mm | | |
| | 51. Serial No. And/Or Owner Applied No. N/A | | 52. Value N/A | | 53. License No. | | 54. State | | 55. Veh. Yr. | | |
| | 56. Make/Style | | 57. Model | | 58. Color/Color | | 59. Value | | 60. VIN Number | | |
| NARRATIVE | 61. Vehicle Marks/Damage/Decals/Comments | | 62. Narrative of Offense (Attach Additional Narrative If Needed) On 04-17-04 I was dispatched to the address above on a Domestic Violence call. Upon arrival I spoke to V. Hahn. Ms. Hahn stated that her live in boyfriend, R. Miller had hit her several times in the face and scratched her several times on the chest. Ms. Hahn stated Mr. Miller was taking a bath when her baby accidentally dropped his cell phone in the tub. Ms. Hahn stated Mr. Miller then threw a cup of water into the child's face. Ms. Hahn stated she grabbed Mr. Miller to | | | | | | | | |
| | 63. Evidence Disposition (Location) CID Evidence Box | | | | 63A. Complainant/Victim Signature: | | | | | | |
| | 64. MOI (Reverse Side) | | | | CODE | | CODE | | 65. OFFENSE STATUS | | |
| MOI | 1. Type of Premise | | 7. Weapon Type | | 66. Reporting Officer No. 41 Name C. J. J. J. | | 67. Division Patrol | | 68. Reviewing Supervisor No. 603 Name J. J. J. | | |
| | 2. Object of Attack | | 8. Use of Weapon | | 69. Follow-Up Officer No. Name | | 70. Date/Time Assigned | | 71. Attachments <input type="checkbox"/> Narrative <input type="checkbox"/> Other (Describe) Property Invoice | | |
| | 3. Point of Entry | | 9. Method of Departure | | 72. Status: E-Evidence S-Stolen R-Recovered D-Damaged | | 73. White-Records Pink-Court/Detectives Canav. Crime Analysis Gold-Reporting Officer/MCO | | 74. Exhibits A-1 | | |
| 4. Method of Entry | | 10. Demeanor of Suspect | | 75. 60 Suspended Inactive | | 76. 63 Patrol Follow-Up | | 77. 66 Detective Follow-Up | | 78. 40 Cleared Exceptional Juv. | |
| 5. Method of Attack (Person) | | 11. Evidence Obtained | | 79. 60 Cleared Adult Arrest | | 80. 20 Cleared Exceptional Adt. | | 81. 30 Cleared Juvenile Custody | | 82. 40 Cleared Exceptional Juv. | |
| 6. Method of Attack (Property) | | 12. Place of Offense | | 83. Signed Affidavit | | 84. Will | | 85. 60 Cleared Adult Arrest | | 86. 20 Cleared Exceptional Adt. | |
| | | 13. Solvability Factors | | 87. 63 Patrol Follow-Up | | 88. 66 Detective Follow-Up | | 89. 30 Cleared Juvenile Custody | | 90. 40 Cleared Exceptional Juv. | |

NARRATIVE FORM

- ☐ Original Report
☒ Offense Supplement
☐ Custody Supplement
☐ Other

Type Incident/Crime:

Domestic Violence

Date of This Report

04-17-04

Date of Original Report

04-17-04

Suspect/Victim Name

Veronica L. Hahn

List Complaint Numbers of Connected Cases

01

| Status | Qty. | Article | Brand/Make | Model Name | Description | Serial No. or OAN | Value |
|--------|------|---------|------------|------------|-------------|-------------------|-------|
|--------|------|---------|------------|------------|-------------|-------------------|-------|

protect her baby. ms. Hahn stated mr. miller then pushed her on to the floor and punched her several times in the face and ripped her shirt off. ms. Hahn stated that she want to call for help but mr. miller took the phone off the hook. ms. Hahn stated she grabbed her baby and went into the baby's room. ms. Hahn stated mr. miller then entered the baby's room and she started screaming for help, picked up her baby and exited the room and the apartment. ms. Hahn stated a neighbor upstairs heard her screaming and called the sheriff's department. I noticed swelling to the left side of ms. Hahn's face and her lip busted. mr. miller stated that he did throw water on the baby but he did not hit ms. Hahn. mr. miller stated after he threw the water on the baby ms. Hahn attacked him. mr. miller stated that he was protecting himself from ms. Hahn. I noticed a scratch mark on mr. miller's neck. ms. Hahn stated that they have been living together for a year and that the baby is not mr. miller's baby. I then arrested mr. miller for Domestic Violence (Simple Assault). ms. Hahn signed charges for Domestic Violence (Simple Assault) and she was given a victim's rights packet. I then transported mr. miller to the jail.

DISPOSITION

- ☒ A. Cleared Adult Arrest
☐ B. Cleared Exceptional Adult
☐ C. Cleared Juvenile Custody
☐ D. Cleared Exceptional Juvenile
☐ E. Unfounded
☐ F. Other — Cleared Exceptional
☐ G. Suspended Closed

Inmate Jacket 0015

Reporting Officer:

to: 41 Name C. Judy

Division

Patrol

Reviewing Supervisor:

No. 63 Name JRC

Disposition Date

04-11-04

What Prompted Arrest

03 of 04

Inmate Jacket: 0016

04-278

HARRISON COUNTY SHERIFF'S DEPARTMENT

PROPERTY INVOICE

| | | | |
|---|----------------------------|--------------------------|---------------------|
| Case Number: <u>04-27831</u> | Officer: <u>C. Judy</u> | Date: <u>01-17-04</u> | ID No: <u>41</u> |
| Name: <u>VERONICA L. HAHN</u> | D.O.B.: <u>10-12-78</u> | Race: <u>W</u> | Sex: <u>F</u> |
| Address: <u>18049 Old Hwy 49 Apt. A</u> <small>Street</small> <u>SAWDOER, MS</u> <small>City / State</small> <u>39574</u> | | | |

☒ Victim ☐ Suspect ☐ Owner ☐ Finder Phone Number: 832-5111

Nature of Case: Domestic Violence (Simple Assault)

Was there an arrest?: ☒ Yes ☐ No Name: Roderick C. Miller

Where was the property recovered from?: D3 Pictures of victims face and 01 picture of suspect neck

| Item # | Item Description | Serial # | Currency | Bin # |
|--------|-----------------------------|----------|----------|-------|
| 1 | KODAK Fun Saver 35mm Camera | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
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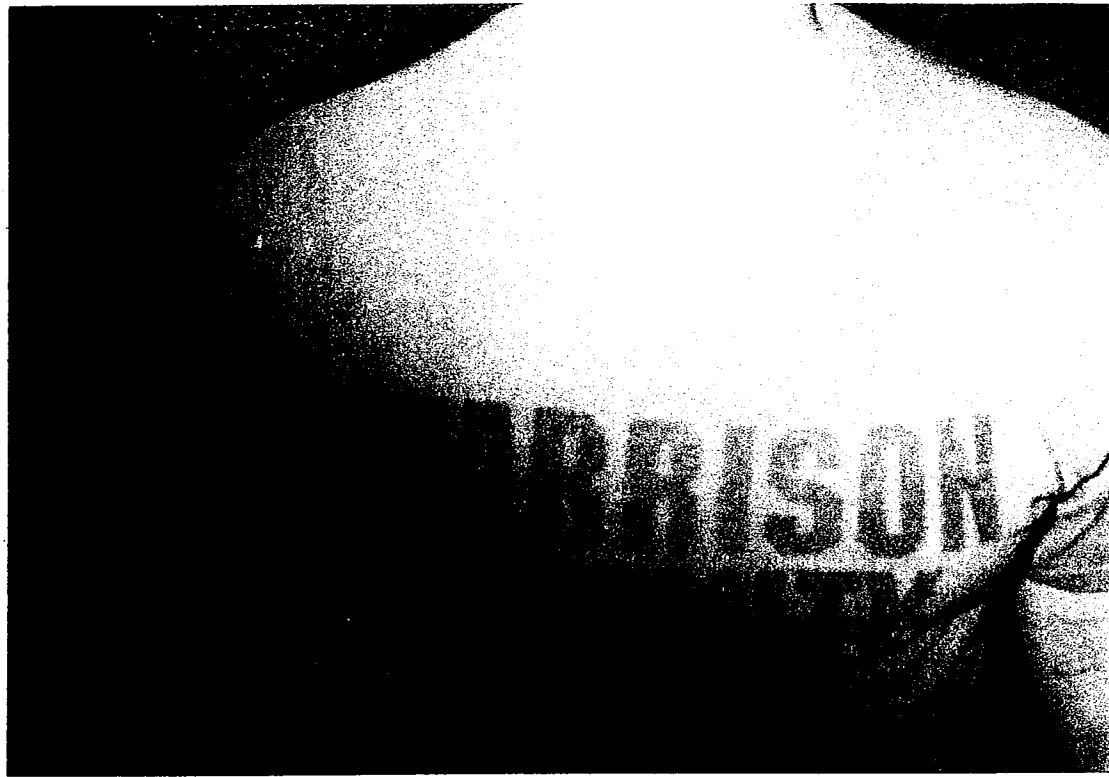
CHAIN OF CUSTODY

| Possession | Date | Possession | Date |
|-----------------------------|-----------------|------------|------|
| From: <u>C. Judy 41</u> | <u>01-17-04</u> | From: | |
| To: <u>CTD Evidence Box</u> | <u>01-17-04</u> | To: | |
| From: | | From: | |
| To: | | To: | |
| From: | | From: | |
| To: | | To: | |

Remarks: _____

Delivered to: ☒ Property Room ☐ Other: _____

Distribution: **White Original** - Property Room Files **Second White Copy** - Records **Third White Copy** - Investigators **Fourth White Copy** - Receipt

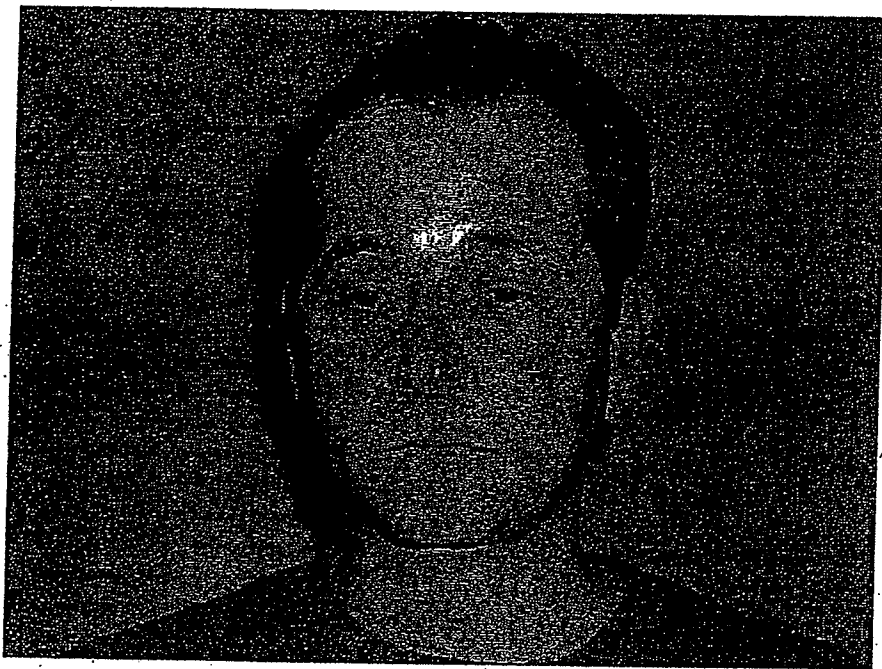




BOOKING REPORT

Harrison County Sheriff's Office

MILLER,RODERICK CLARK



Agency ID : CJ000257393

Race : W

Date of Birth : 19651220

Sex : M

Place of Birth : LITTLE ROCK,AR

Weight : 150

Social Security : 436829216

Height : 507

Occupation : BEAU RIVAGE CASINO

Hair : BRO

Alias :

Eye : BRO

HARRISON COUNTY ADULT DETENTION FACILITY

Classification Record I. Assessment/Reassessment

Name: Amber Roderick DOB: 12/20/85

Social Security #: 436829216 BSC: H Doc #: 257393

Current Charges: Domestic Violence M or F Sentenced Pre-trial

Custody Level Decision: Minimum

Housing Assignment: D E DA
Block Section Cell

CHECK LIST

| | YES | NO |
|--|----------------|-----------------------------------|
| Chaplain Form Complete | <u>/</u> | <u>X</u> |
| Handbook Provided | <u>/</u> | <u>/</u> |
| Visitation Form Complete | <u>/</u> | <u>/</u> |
| Special Skills <u> </u> | <u>/</u> | <u>/</u> (list skills verbalized) |
| ID Band Issued | <u>X</u> | <u>/</u> |
| Property Receipt Copy | <u>/</u> | <u>/</u> |
| Religion Preference | <u>Baptist</u> | <u>/</u> |

SPECIAL SKILLS

INMATE CAN READ Yes X No /
INMATE CAN WRITE Yes / No /
PHYSICAL CONDITION Poor / Good / Fair / (Visual Appearance)

Comments copy to forwarded to medical 4/18/04

LANGUAGE English / Spanish / Other /

NOTES: Headaches CAT-scan x 1 week for neurological problems

J. Deas
Classification Officer

322
Badge #

4/18/04
Date

[Signature]
Inmate's Signature

4-18-04
Date

Inmate Jacket 0030

INITIAL CLASSIFICATION ASSESSMENT SCALE

II. CUSTODY EVALUATION

1. SEVERITY OF CURRENT CHARGES/CONVICTIONS (Use Severity of Offense Scale; rate most serious charge/conviction, including any detainers/warrants)

| | | |
|----------|---|---------------|
| Low | 0 | <u>2</u> |
| Moderate | 2 | <u>1</u> |
| High | 5 | <u> </u> |
| Highest | 7 | <u> </u> |

Score 2

2. SERIOUS OFFENSE HISTORY (Use of Offense Scale; rate most serious prior conviction)

| | | |
|-------------|---|---------------|
| None or Low | 0 | <u>1</u> |
| Moderate | 1 | <u>1</u> |
| High | 4 | <u> </u> |
| Highest | 7 | <u> </u> |

Score 1

3. ESCAPE HISTORY (Excluding current charges)

| | | |
|---|---|---------------|
| No escapes or attempts | 0 | <u>1</u> |
| Walkway or attempted escape from minimum security facility or failure to return from authorized absence | 3 | <u> </u> |
| Escape or attempted escape from medium or maximum security setting | 7 | <u> </u> |

Score 0

MAXIMUM CUSTODY SCORE (Add Items 1, 2, and 3)

Score 2

SCORE OF 7 OR HIGHER, ASSIGN TO MAXIMUM CUSTODY
(Always complete remaining items, but do not total score if inmate has already been assigned to maximum custody.)

4. INSTITUTIONAL DISCIPLINARY HISTORY

| | | |
|---|---|---------------|
| None or minor with no segregation time | 0 | <u>1</u> |
| 1 or more major disciplinary reports and/or time in segregation | 3 | <u> </u> |

Score 0

5. PRIOR FELONY CONVICTIONS (Excluding current charges)

| | | |
|-------------|---|---------------|
| None | 0 | <u>1</u> |
| One | 2 | <u>1</u> |
| Two or more | 4 | <u> </u> |

Score 0

Score 2

6. ALCOHOL/DRUG ABUSE

| | | |
|--|---|---------------|
| No social, economic or legal problems related to abuse | 0 | <u>1</u> |
| Abuse resulting in social, economic or legal problems | 1 | <u> </u> |

Score 0

7. Abuse resulting in assaultive behavior

| | |
|---|---------------|
| 3 | <u> </u> |
|---|---------------|

Score 2

8. STABILITY FACTORS (Deduct indicated points)

Age 26 or over

-1

Employed or attending school for 6 months prior to arrest

-1

Lived at same address for 12 or more months prior to arrest

-1

No Rule violation in past 6 months

-1

Score 3Score 1

III. SCALE SUMMARY AND RECOMMENDATIONS

A. CUSTODY LEVEL INDICATED BY SCALE

1 - Minimum

2 - Medium

3 - Maximum

Code 1Custody Classification Chart

| | |
|---|---------|
| 7 or more points on items 1 - 3 | Maximum |
| 5 or fewer points on items 1 - 7 with detainer/warrant | Medium |
| 6 to 10 points on items 1 - 7 | Medium |
| 5 or fewer points on items 1 - 7 | Minimum |
| 11 or more points on items 1 - 7 | Maximum |

B. CHECK (X) ALL THE SPECIAL MANAGEMENT CONCERNS WHICH APPLY TO THIS INMATE:

☐ Protective Custody☐ Known Management Problem☐ Psychological Impairment☐ Suspected Drug Trafficker☐ Mental Deficiency☒ Suicide Risk☐ Serious Violence Threat☒ Medical Problem *164 dach v 3*☐ Known Gang Affiliation☐ Physical Impairment☐ Substance Abuse Problem☐ Other (specify): _____

C. OVERRIDE OF SCALE CUSTODY LEVEL IS RECOMMENDED

1 - Yes

2 - No

Code _____

If yes, give rationale (required): _____

D. RECOMMENDED CUSTODY LEVEL

1 - Minimum

2 - Medium

3 - Maximum

Code _____

Officer's Signature _____

Date _____

IV. SUPERVISOR APPROVAL OF OVERRIDE

A. RECOMMENDED CUSTODY LEVEL Code
1 - Approved 2 - Disapproved (Complete B.)

B. FINAL CUSTODY LEVEL (IF OVERRIDE DISAPPROVED) Code
1 - Minimum 2 - Medium 3 - Maximum

Rationale (required if different from recommendation): _____

Supervisor's Signature _____ Date _____

V. RECOMMENDED HOUSING ASSIGNMENT

Location: _____

AFFIDAVIT - COUNTY OF HARRISON

1st JUDICIAL DISTRICT

STATE OF MISSISSIPPI

CASE # 04-27837

Before me, Justice Court Judge/Clerk/Notary Public of Harrison County, 1st Judicial District, State of Mississippi,

VERONICA HAHN

makes affidavit on information that

Roderick C. Miller

on or about the 17th day of April, 2004, in the said County aforesaid in Justice's District,

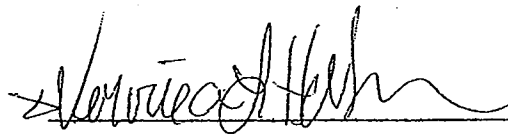
did purposely, knowingly and unlawfully commit an act of domestic violence in that he/she caused bodily injury to (name of victim) Veronica L. Hahn by (describe act) punching her several times upon the face

(name of victim) Veronica L. Hahn had the following relationship* to (name of defendant) Roderick C. Miller at the time of the assault: Live-in boyfriend of one year.

DOMESTIC VIOLENCE - SIMPLE ASSAULT

[97-3-7 (3)]


* Acceptable relationships: current or former spouse, individual with whom the defendant has had a biological or legally adopted child, family or household member who resides or formally resided with the defendant, person with whom the defendant has a dating relationship [relationship of an intimate or romantic nature]



Affidavit's Signature

Sworn and subscribed before me this 17th day of April, 2004

MY COMMISSION EXPIRES JUNE 14, 2005


Justice Court Judge/Clerk/Notary Public

JMN LE505S01 04/17/2004 HARRISON COUNTY ADC
PROPERTY ACQUIRED/ISSUED Page 2

NAME MILLER, RODERICK CLARK
SOCIAL SECURITY 436829216

BOOKING DATE 4-17-2004 TIME 18:21
BIRTH DATE 12-20-1965

DOCKET NUMBER CJ 257393
SEX M RACE W

| ACQUIRED DATE | OFFICER | ITEM | DESCRIPTION | FROM |
|---------------|---------|--------|---------------|--------|
| 4/17/2004 | 221 | PANTS | BLACK | MILLER |
| 4/17/2004 | 221 | SHOES | X2 BLACK | MILLER |
| 4/17/2004 | 221 | WATCH | BLACK | MILLER |
| 4/17/2004 | 221 | KEYS | 1 SET | MILLER |
| 4/17/2004 | 221 | OTHER | CELL PHONE | MILLER |
| 4/17/2004 | 221 | SHIRT | WHITE | MILLER |
| 4/17/2004 | 221 | WALLET | WITH CONTENTS | MILLER |
| 4/17/2004 | 221 | OTHER | LOOSE CHANGE | MILLER |

| ISSUED DATE | OFFICER | ITEM | DESCRIPTION | FROM |
|-------------|---------|------------|-------------|---------|
| 4/17/2004 | 221 | BLANKET | | BOOKING |
| 4/17/2004 | 221 | CUP | | BOOKING |
| 4/17/2004 | 221 | SOAP | | BOOKING |
| 4/17/2004 | 221 | SANDALS | TWO | BOOKING |
| 4/17/2004 | 221 | MATTRESS | | BOOKING |
| 4/17/2004 | 221 | MATT COVER | | BOOKING |
| 4/17/2004 | 221 | PANTS | | BOOKING |
| 4/17/2004 | 221 | PROP SHEET | | BOOKING |
| 4/17/2004 | 221 | SPOON | | BOOKING |
| 4/17/2004 | 221 | T SHIRT | | BOOKING |
| 4/17/2004 | 221 | SHEET | | BOOKING |
| 4/17/2004 | 221 | TOOTHBRUSH | | BOOKING |
| 4/17/2004 | 221 | TOOTHPASTE | | BOOKING |
| 4/17/2004 | 221 | TOWEL | | BOOKING |

ARRESTEE/INMATE SIGNATURE: _____ DATE: _____

BOOKING OFFICER SIGNATURE: _____ BADGE NO: _____

JMN LE507S01 04/17/2004 HARRISON COUNTY ADC
BOOKING FORM Page 2

NAME MILLER, RODERICK CLARK
SOCIAL SECURITY 436829216
BOOKING DATE 4-17-2004 TIME 18:21 DOCKET NUMBER CJ 257393
BIRTH DATE 12-20-1965 SEX M RACE W
BOOKING OFFICER

| ID | FELONY CHARGES CHARGE CODE DESCRIPTION | CASE AGENCY NUMBER | BOND TYPE | AUTHORITY | AMOUNT |
|-----------|---|-----------------------|--------------|----------------------------|--------|
| 1421046 | DOMESTIC VIOLENCE | 2400 | NB | LADNER, LOUISE JUSTICE COU | |
| 4/17/2004 | BSC H | | | | |
| 4/17/2004 | CHRGSTAT NI | CHARGE ID 001421046 | | | |
| 4/17/2004 | MEDICAL ADD | | | | |

Arrest No: CJ 257393 File # 23345 Name MILLER, RODERICK CLARK

| Date | Time | Type | Code | Comment |
|------------|-------|----------|------|---|
| 04/17/2004 | 18:21 | PERSON | ADD | |
| 04/17/2004 | 18:37 | BSC | H | |
| 04/17/2004 | 18:57 | CHRGSTAT | NI | |
| 04/17/2004 | 19:02 | PROPERTY | ACQ | PANTS BLACK |
| 04/17/2004 | 19:02 | PROPERTY | ACQ | SHOES X2 BLACK |
| 04/17/2004 | 19:02 | PROPERTY | ACQ | WALLET WITH CONTENTS |
| 04/17/2004 | 19:03 | PROPERTY | ISS | BLANKET |
| 04/17/2004 | 19:03 | PROPERTY | ISS | CUP |
| 04/17/2004 | 19:03 | PROPERTY | ISS | PROP SHEET |
| 04/17/2004 | 19:03 | MEDICAL | ADD | |
| 04/18/2004 | 10:40 | CHARGE | MOD | BOND RED A/O LADNER PER TELECOM |
| 04/18/2004 | 10:40 | CHRGSTAT | BR | |
| 04/18/2004 | 14:01 | MOD | | CLASSIFIED MINIMUM RECIEVED INMATE HANDBOOK |
| 04/18/2004 | 17:47 | RELEASED | BC | |
| 04/18/2004 | 17:47 | PROPERTY | REL | PANTS BLACK |
| 04/18/2004 | 17:47 | PROPERTY | REL | SHOES X2 BLACK |
| 04/18/2004 | 17:47 | PROPERTY | REL | OTHER LOOSE CHANGE |

10/04/2007 12:40:07
QPADEV00
(1) Display (2) First (5) Next 4 - 17 - 2004 Time 19 : 21 (24) Exit

Arrest No: CJ 257393 File # 23345 Name MILLER, RODERICK CLARK

| Date | Time | Type | Code | Comment |
|------------|-------|--------------|---------|--------------|
| 04/18/2004 | 17:47 | PROPERTY REL | OTHER | LOOSE CHANGE |
| 04/18/2004 | 17:47 | PROPERTY RET | BLANKET | |
| 04/18/2004 | 17:47 | PROPERTY RET | CUP | |
| 04/18/2004 | 17:47 | PROPERTY RET | SANDALS | TWO |
| 04/18/2004 | 17:47 | PROPERTY RET | T SHIRT | |
| 04/20/2004 | 14:50 | RECORDS | NUMB | |
| 04/20/2004 | 14:50 | PERSON | MOD | |

Harrison County Adult Detention Center

George Payne, Jr., Sheriff

Inmate Personal Property Inventory Form

Inmate's Name: Miller Roderick

| Item | No. | Description | Item | No. | Description |
|--------------|-----|---------------|--------------|-----|-------------|
| Earrings | | | Pants | 1 | BLK |
| Bracelets | | | Jacket | | |
| Watch | 1 | Black. | Hat | | |
| Keys | 14 | on Ring | Shirt | 1 | White |
| Lighter | | | Shoes | 1 | BLK |
| Wallet | 1 | w/cont BLK. | Belt | | |
| Driv. Lic. | | | T-shirt | | |
| Credit Cards | | | Knife | 1 | Black |
| Medication | | | Glasses | 022 | |
| Necklaces | | | Rings | | |
| Checkbook | | | Purse | | |
| Food stamps | | | Casino chips | | |
| Cell phone | 1 | cell phone. | Pager | | |
| Cigarettes | | | Underwear | | |
| Misc. | 1 | loose change | Misc. | 1 | BLK SOCKS |
| Misc. | 1 | Alarm Remote. | Misc. | | |
| Misc. | 1 | one cigarette | Misc. | | |
| Misc. | | | Misc. | | |

Large Property Yes ☐ No ☒ If "Yes", Number of Bags _____ Boxes _____Money Received: 0 Receipt Number: _____

I certify that the personal property listed above is all of the property I had in my possession at the time of admission.

Inmate's Signature: [Signature] Date: 7Booking Officer: [Signature] Date: 7Arresting Officer: [Signature] Date: 4-17-04

Inmate Jacket 0022

JMN LE503501 04/17/2004 HARRISON COUNTY ADC MEDICAL SCREENING

NAME: MILLER, RODERICK CLARK BOOKING DATE 4-17-2004 TIME 18:21 DOCKET NUMBER CJ 257393
SOCIAL SECURITY 436829216 BIRTH DATE 12-20-1965 SEX M RACE W

1. HAVE YOU RECENTLY EXPERIENCED ANY OF THE FOLLOWING?
JOB LOSS: N ARREST OF LOVED ONE: N DEATH OF LOVED ONE: N MARITAL SEPARATION: N DIVORCE: N
LOSS OF BUSINESS: N LOSS OF HOME: N MAJOR FINANCIAL LOSS: N OTHER LOSS N

2. DO YOU HAVE ANY OF THE FOLLOWING?
CAST: N BRACE: N PROSTHESIS: N DENTURES: N LENS OR GLASSES: N HEARING AID: N

3. DO YOU (DID YOU EVER) HAVE ANY OF THESE PROBLEMS?
RECTAL BLEEDING: N HEART DISEASE: N ASTHMA: N KIDNEY OR BLADDER: N LIVER DISEASE: N CANCER: N
LUNG PROBLEMS: N VENEREAL DISEASE: N ULCERS: N HIGH BLOOD PRESSURE: N SEIZURES: N HEPATITIS: N
HOMICIDAL: N RHEUMATIC FEVER: N SUICIDAL IDEATION: N ATTEMPTED SUICIDE: N
TUBERCULOSIS: N DIABETES: N

4. DO YOU HAVE A PHYSICAL DISABILITY? N

5. DO YOU HAVE MENTAL HEALTH PROBLEMS? N

6. ARE YOU ALLERGIC TO ANY FOODS, DRUGS, MEDICATIONS OR OTHER THINGS WE SHOULD KNOW ABOUT? N

7. DO YOU HAVE ANY UNUSUAL HOME PROBLEMS? N

8. HAVE YOU HAD A TB SKIN TEST? N

9. ARE YOU ON PRESCRIPTION MEDICATIONS? N

10. HAVE YOU EVER USED I.V. DRUGS? N

11. HAVE YOU EVER HAD MAJOR SURGERY? N

12. HAVE YOU HAD A BLOOD TRANSFUSION SINCE 1978? N

13. HAVE YOU EVER BEEN TESTED FOR AIDS? N

14. HAVE YOU EVER HAD A SEXUALLY TRANSMITTED DISEASE? N

15. (MALES ONLY) HAVE YOU EVER HAD SEX WITH ANOTHER MAN? N

16. (FEMALES ONLY) DO YOU HAVE ANY OF THE FOLLOWING PROBLEMS?
LUMPS IN BREAST: N BREAST CANCER: N PROBLEMS WITH MENSTRUAL CYCLE: N RECENTLY GAVE BIRTH: N CYSTS: N
VAGINAL DISCHARGE: N UTERINE CANCER: N PREGNANT: N HYSTERECTOMY: N ANY TYPE OF CANCER: N

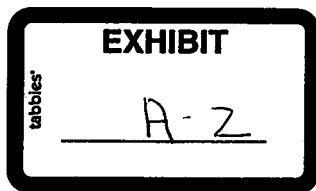
17. (FEMALES ONLY) HAVE YOU EVER HAD SEX WITH ANOTHER WOMAN? N

18. ANY OTHER MEDICAL PROBLEMS? Y
STATES HE IS ON MEDICATION FOR EXTREME HEADACHES

COMMENTS/REMARKS:

ARRESTEE/INMATE SIGNATURE: _____ DATE: _____

BOOKING OFFICER SIGNATURE: _____ BADGE NO: _____



Inmate Jacket 0035

MEDICAL OBSERVATIONS

NAME MILLER, RODERICK CLARK
SOCIAL SECURITY 436829216

BOOKING DATE 4-17-2004 TIME 18:21
BIRTH DATE 12-20-1965

DOCKET NUMBER CJ 257393
SEX M RACE W

1. DOES THE ARRESTEE/INMATE HAVE OBVIOUS PAIN, BLEEDING, INJURY OR ILLNESS REQUIRING MEDICAL ATTENTION? N
2. WAS THE ARRESTEE/INMATE TAKEN TO THE HOSPITAL PRIOR TO INTAKE? N
3. DOES THE ARRESTEE/INMATE APPEAR TO BE UNDER THE INFLUENCE OF ALCOHOL? N DRUGS? N
4. DOES THE ARRESTEE/INMATE DISPLAY VISIBLE SIGNS OF ALCOHOL/DRUG WITHDRAWAL? N
5. IS THERE OBVIOUS SIGNS OF FEVER, JAUNDICE OR OTHER EVIDENCE OF INFECTION WHICH MIGHT BE CONTAGIOUS? N
6. IS THE ARRESTEE/INMATE SKIN IN GOOD CONDITION AND FREE FROM VERMIN? Y
CLEAR
7. DOES THE ARRESTEE/INMATE APPEAR TO HAVE DIFFICULTY UNDERSTANDING QUESTIONS OR SPOKEN LANGUAGE? N
8. IS THE ARRESTEE/INMATE EXPERIENCING, DEMONSTRATING OR EXHIBITING ANY OF THE FOLLOWING? NERVOUSNESS: N
STRESS: N ASSAULTIVE: Y ANGRY: Y HOSTILE: Y VIOLENT BEHAVIOUR: Y LIFELESS REACTION: N
PASSIVE: N DEPRESSED: N DISORIENTED: N HEARING VOICES N BIZARRE BEHAVIOUR: N EXTREME EMOTIONS: N
VERY HOSTILE AND BELIGERENT
9. DOES THE ARRESTEE/INMATE HAVE SCARS ON WRIST, LEGS OR NECK (POSSIBLE SELF INFLECTED) N

BOOKING OFFICER SIGNATURE: _____ BADGE NO: _____ DATE: _____